OMB APPROVAL FORM D **UNITED STATES** OMB NUMBER: 3235-0076 SECURITIES AND EXCHANGE COMMISSION April 30, 2008 Expires: Washington, D.C. 20549 RECEIVED Estimated average burden hours per response. FORM D **DEC 1 8 2006** NOTICE OF SALE OF SECURITIES SEC USE ONLY PURSUANT TO REGULATION D, Prefix Serial **SECTION 4(6) AND/OR** 160 UNIFORM LIMITED OFFERING EXEMPTION Date Received Name of Offering (check if this is an amendment and name has changed, and indicate change.) Offering of Series B-11 Units □ ULQE Filing Under (Check box(es) that apply): ☐ Rule 504 □ Rule 505 ☑ Rulc 506 ☐ Section 4(6) Type of Filing: □New Filing A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) Trex Partners, LLC (Number and Street, City, State, Zip Code) Address of Executive Offices Telephone Numbe c/o Trex Enterprises Corporation, 10455 Pacific Center Court, San Diego, CA 92121 (858) 254-6436 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business** Holding company for wholly-owned subsidiaries who provide a solution for companies organized in the People's Republic of China to issue credit cards in the People's Republic of China Type of Business Organization other (please specify): limited liability corporation ☐ limited partnership, already formed ■ business trust ☐ limited partnership, to be formed company 160 Month 0 5 2 Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) **GENERAL INSTRUCTIONS** Federal: FINANCIAL Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that

address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC; one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.

Check Box(es) that Apply:		☑ Beneficial Owner		☐ Director	☑ Manager
Full Name (Last name first, if indi	ividual)		· · · · · · · · · · · · · · · · · · ·		
Trex Enterprises Corporation					
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
10455 Pacific Center Court, S	an Diego, CA 92	2121		•	
Check Box(es) that Apply:	□ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	Manager
Full Name (Last name first, if indi	ividual)			****	
Pacificap Credit Hawaii Fund	I, LLC				•
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
841 Bishop Street, Suite 1020	, Honolulu, Haw	raii 96813			
Check Box(es) that Apply:	□ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	
Full Name (Last name first, if indi	ividual)				
PacifiCap Group, LLC					
Business or Residence Address	(Numb	er and Street, City, State, 2	Cip Code)		
841 Bishop Street, Suite 1020,	, Honolulu, Haw	aii 96813			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if indi	vidual)				
		•			
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ Manager
Full Name (Last name first, if indi	ividual)				
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
					•
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	ividual)				
					:
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if indi	vidual)	-		•	
Business or Residence Address	(Numb	er and Street, City, State, 2	Lip Code)		
	(/		

		Andreas Constitution		B. INFO	DRMATIO	N ABOUT	OFFERI	NG				
1. Has the i	ssuer sold,	or does the is	ssuer intend	to sell, to	non accredi	ted investor	rs in this of	fering?				No . ⊠
			Ans	wer also in	Appendix,	Column 2,	if filing und	ler ULOE.		·		
2. What is	the minimu	m investmen					_		***********		\$ 10,000)
				•	•						Yes No	
3. Does the offering permit joint ownership of a single unit?									∅ (3		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated persons of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code)		person or										
N/A							•					
	Residence	Address (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of As	sociated Br	oker or Deal	ег							<u> </u>	<u> </u>	
		Listed Has S			Solicit Purc	hasers						
		or check ind		·				(DC)	FT2T 1			All States
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[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] (SC)	[NV] [SD]	[NH] - [TN]	[LN] [XX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
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Business or	Residence.	Address (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of As	sociated Br	oker or Deal	er									
		Listed Has							•			. 11 54-4
(Check	[AK]	or check ind [AZ]	IVIGUAI STA [AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	L <i>F</i> [HI]	All States [ID]
[!L]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	ונאן	[WM]	[NY]	(NC)	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[אדן]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
		first, if indiv		(171)	[0.1]	(,,)	(,,,,	[,,,,	[,, ,]	11	11	
Business or	Residence .	Address (Nu	mber and S	treet, City,	State, Zip (Code)						
Name of As	sociated Br	oker or Deal	er									
States in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	hasers			 			
(Check	"All State"	or check ind						•••••	•••••			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH] .	[lN]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	(VA)	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s	\$
	Equity		\$
	□ Common ☑ Peferred		
	Convertible Securities (including warrants)	s	\$
	Partnership Interests	\$	\$
	Other (Specify Series B-11 limited liability company membership units)	
		\$ <u>31,875,000</u>	\$ <u>31,875,000</u>
	Total	\$ <u>31,875,000</u>	\$31,875,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	_17	\$ 29,814,600
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of	Dollar Amount
	Rule 505	Security	Sold \$
	Regulation A		s
	Rule 504		s
	Total		\$_0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		B \$
	Printing and Engraving Costs		□ \$
	Legal Fees		S 100,000
	Accounting Fees		50,000
	Engineering Fees		□ \$
	Sales Commissions (specify finders' fees separately)		□ S
	Other Expenses (identify)		□ \$
	Total		№ \$ 150,000

i. 🔐	C. OFFERING PRICE	E, NUMBER OF INVESTORS; EXPENSES AND US	E OF P	ROCEEDS	
b	I and total expenses furnished in respons	the offering price given in response to Part C - Question se to Part C - Question 4.a. This difference is the			\$ <u>31,725,000</u>
u: e:	ed for each of the purposes shown. If the timate and check the box to the left of the	gross proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C - Question 4.b above.		Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		🗆	\$	□ \$
	•			\$	□ \$
	Purchase, rental or feasing and installat	ion of machinery and equipment	. 🗆	s	\$
	Construction or leasing of plant building	gs and facilities	🗖	s	□ \$
	offering that may be used in exchange t	ing the value of securities involved in this for the assets or securities of another		s	- S
	Repayment of indebtedness		. 🗖	s	□ \$
	Working Capital		. 🗖	\$	□ \$
	Other (specify): <u>Investment in subsi</u>	diaries for their working capital and research and	_		(
	development activities			s	S \$ 31,725,000
	Column Totals		. a	\$ 0.00	S \$ 31,725,000
	Total Payments Listed (Column totals a		□ \$ _	31,725,000	
		- ALEID FEDERAL SIGNATURE (A. 1888)	Bor VI	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
The fo	issuer has duly caused this notice to be signal	aned by the undersigned duly authorized person. If this ing by the issuer to furnish to the U.S. Securities and Exister to any non-accredited investor pursuant to paragr	notice is change (filed under Ru	le 505, the
	er (Print or Type) Partners, LLC	Signature	·	Date December 12	2006
	e of Signer (Print or Type) ory J. Getschman	Title of Signer (Print or Type) Assistant Secretary			

ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)